Profile of Knowledge Management, Basic Sanitation and Attitudes towards Clean and Health Community in Kupang City

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Abstract

The objective of research is to describe the knowledge and attitude of basic sanitation management community in Kupang City. This type of research is a survey research using quantitative approach. Data were collected by using the instrument in the form of test knowledge of basic sanitation management and attitude questionnaire. The data was then processed and analyzed using descriptive statistics. The Result of the research was sanitation management knowledge base is in low category whereas attitude clean and healthy life, about 61.5% of Kupang not leave a comment. The knowledge is still low is illustrated by the habit of living of the community, particularly in watersheds where there are many people using the river as a final disposal of feces them also as a public bathing and washing.

Keywords: knowledge management, sanitation, clean and health community

1. Introduction

Along with population growth and increasing activity from time to time causing degradation in environmental quality especially at urban (Emil, 1993). Lifestyle of the people who frequently change the environment causes impacts on the environment (Department of Health, 2005). When the environment gets worse due to the behavior of the community, the community itself becomes a threat. Sarudji (2006) states that the health of the environment (environmental health), is a reciprocal relationship between humans and the environment that result in preventing accidents, the spread of water-borne diseases, air, food, and health vectors.

Environmental health covers all aspects of human life, especially community environmental sanitation. Notoatmodjo (2007) says that sanitation is an environmental health status includes housing, sewerage, water supply, and so on. While management is a process of environmental sanitation activities to improve and maintain basic standards of environmental conditions that affect human well-being (Blum, 1974). Environmental conditions that describe the welfare of society by Adnani (2011), include: (1) clean and safe water supply; (2) the disposal of animal waste, human and efficient industries; (3) protection of food from biological and chemical contamination; (4) air is clean and safe; and (5) a clean and safe home.

Wahyuni (2011) states that people who have higher levels of education are more oriented on preventive measures, because it has a lot of knowledge about health problems, therefore has a better health status. Knowledge can form certain beliefs that someone behave in relation with that belief, for example, with the knowledge of good environmental health is expected to increase public awareness of the importance of creating a healthy environment, so as to break the chain of transmission of the disease and behavior-based environment clean and healthy life so that no easily catch the disease based on environment (Notoatmodjo, 2010). Less knowledge about sanitation management can affect the lifestyle of the people who will be reflected in his attitude (Mulyadi, 2010). The attitude of people who do not care about the environment it will affect the behavior of a clean and healthy life (Sarwono, 2007).

Kupang city has an area of 180.27 km² with a population of about 450,000, the average inhabited 2,113 persons/km² with a population growth rate of an average of 13% per year (Anonymous, 2014). One of the basic infrastructure of concern in the construction of which is not much rely on the service system in the city of Kupang and get a direct influence on health due to the high population density, namely infrastructure excreta

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disposal, waste water disposal, garbage disposal, healthy homes, food sanitation, and water supply compared with other infrastructure components such as roads, electricity, and telecommunications networks.

Based on the above, the issue raised in this research is how the image of the knowledge and attitude of the management of environmental sanitation for a clean and healthy lifestyle. So the research objectives to be achieved are to describe the basic sanitation management knowledge and attitudes clean and communities in Kupang.

2. Research Methods

This type of research is a survey research using quantitative approach. The research objectives are people who live in four villages of Kupang, namely: Oebobo Village, Village Fontein, Village and Village Namosain Solor. Sampling procedures conducted randomized to receive 200 heads of household population of the city of Kupang with through systematic random sampling method. Data were collected by using the instrument in the form of test knowledge of basic sanitation management and attitude questionnaire. The data was then processed and analyzed using descriptive statistics.

3. Results Research

3.1 Description the Knowledge of Basic Sanitation

Descriptive analysis to determine the image of public knowledge about the management of basic sanitation in the city of Kupang by using a test instrument consisting of 29 items, is as follows:

	Table 1.	. Descriptive	statistics	of community	knowledge
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		Value	
N	Valid	200	
	Missing	0	
Total items		29	
Mean		6.6200	
Std. Error of Mean		.18081	
Median		6.0000	
Modus		9.00	
Std. Deviation		2.55701	
Variance		6.538	
Range		10.00	
Minimum		3.00	
Maximum		13.00	
Sum		1324.00	

Descriptive analysis of the results in Table 1 above that given to 200 respondents obtained a description that public knowledge of the lowest Kupang is 3 and the highest is 13, with an average count is 9.59; median 6.00; and mode of 9:00. Standard deviation (standard deviation) of 2.04 indicates the score distribution of knowledge in the management of data varied basic sanitation.

Furthermore, the data of the respondents based on their level of knowledge of basic sanitation management are grouped into five categories: very low, low, medium, high, and very high, depicted in the table below.

Table 2. Frequency distribution of basic sanitation management knowledge level

Range Score	Category	Frequency	Percent	Valid Percent	Cumulative Percent
0.00-5.80	Very Low	76	38.0	38.0	38.0
5.90-11.70	Low	123	61.5	61.5	99.5
11.80-17.60	Moderate	1	.5	.5	100.0
17.70-23.60	High	0	0.0	0.0	0.00
23.70-29.00	Very High	0	0.0	0.0	0.00
Total		200.00	100.00	100.00	0.00

From the analysis of respondent data based knowledge management basic sanitation can be seen that respondents

with a very low level of knowledge of 38% (76 out of a total of 200 respondents). Respondents with low knowledge level of 61.5% (123 out of a total of 200 respondents). Respondents with a medium level of knowledge at 0:50% (1 out of a total of 200 respondents), and knowledge of high and very high at 0%. From these results it can be concluded that the majority of the level of knowledge of basic sanitation management of the respondents in this study is at a low position with a percentage of 61.50%.

3.2 Description Clean and Healthy Attitude

Descriptive analysis to describe the attitude of a clean and healthy living in the city of Kupang by using questionnaire instrument consisting of a 45-point declaration, are as follows:

Table 3. Descriptive statistics attitude clean and healthy

		Value
N	Valid	200
N	Missing	0
Item number statement		45
Mean		117.8900
Std. Error		1.16362
Median		120.0000
Modus		119.00
Std. Deviation		16.45606
Variance		270.802
Range		164.00
Minimum		45.00
Maximum		209.00
Sum		23578.00

Descriptive analysis of the results in Table 3 above are given to 200 respondents obtained a description that attitude clean and healthy living community in Kupang the lowest was 25.00 and the highest is 209.00 with an average count is 117.89; median 120.00; and 119.00 mode. Standard deviation of 16:45 score distribution of the data showed clean and healthy living attitudes vary.

Furthermore, the data of the respondents based on their level of knowledge of basic sanitation management are grouped into five categories: very low, low, medium, high, and very high, depicted in the table below.

Table 4. Frequency distribution clean and healthy attitude

Range Score	Category	Frequency	Percent	Valid Percent	Cumulative Percent
45.00-81.00	Very Low	4	2.0	2.0	2.0
81.10-117.10	Low	71	35.5	35.5	37.5
117.20-153.20	Moderate	123	61.5	61.5	99.0
153.30-189.30	High	2	1.0	1.0	100.0
189.40-225.00	Very High	0	0.0	0.0	
Total		200.00	100.00	100.00	

4. Discussion

4.1 Description the Knowledge of Basic Sanitation

Based on the analysis above, it is known public knowledge about the management of basic sanitation is low, the analysis results are also consistent with the observation that the field of public access to basic sanitation management in the society such as excreta disposal site (toilet), landfills while, and drain waste permanently in the city of Kupang City is still far from community expectations. Particularly in the study area are still many people use the river in the middle of the city of Kupang as the final disposal of their feces even the most worrying that by the time the children were happy bathing under the stream of time passing stool is also dirt from the hole disposal house directly related to these times. In addition there are a lot of societies creating walled excreta disposal and the door of the fabric without roofs and floors that are not permanently placed outside the home. Waste water disposal pit was directly related to the time. In addition, also that some people still throw

domestic waste directly to time (direct observation at the time of data collection, accompanied by RT and when FGD with communities in the study area).

The observations in some places, such as the Village Fontein where fecal discharge, wastewater and solid waste is channeled directly to the time (time Jerky) which relate directly to the kitchen people around, in the Village Oebobo, and Namosain which is the location of research, there are many temporary latrines are walled latrines are not permanent, with no roof and berpintukan fabric, in addition there are many people carelessly dispose of waste water around the home page without making holes for permanent shelter, and Garbage Disposal Temporary available are limited so people mostly destroy waste by burning the impact on air pollution and soil, in addition to the waste management in the city of Kupang is not set properly even facilities, equipment and transportation to waste management is still very limited.

These results are supported by the results of research conducted by UNICEF to Indonesia in October 2012, stated that faecal contamination of the soil and water are common in urban areas, this is caused by excessive population density, less healthy toilets and waste disposal crude into the open without being processed, while the urban waste management is still done little by little, even landfill being developed but not much progress. Therefore, in this indispensable sufficient knowledge as stock person in a clean and healthy life behavior.

4.2 Description Clean and Healthy Attitude

From the results of the data analysis of respondents by living clean and healthy attitude can be seen that respondents with a level attitude strongly disagree of 2.00% (4 out of a total of 200 respondents), an attitude which does not agree at 35.50% (71 out of a total of 200 respondents), the attitude of the respondents who do not have an opinion of 61.50% (123 out of a total of 200 respondents), attitude who answered agreed at 10:00% (2 out of a total of 200 respondents), and the respondents strongly agreed with the attitude that there is no or 0%. From these results it can be concluded that the majority of respondents' attitudes levels in this study were in the position of being or not to have an opinion with a percentage of 61.50%.

Based on analysis of data obtained by the clean and healthy attitude is obtained that society has no answer opinions. These results are supported by research Ramdaniati (2008) who reported that there was a significant relationship between the attitude of the PHBs in housewives in Manggarai urban RW 04 with the result that of the 95 respondents who have a positive attitude about the PHBs by 57.9 % good, while the remaining 42.1% had less good PHBs, while Meikawati (2010) argues that the attitude of the respondent research findings that support a clean and healthy behaviors thidup higieni and sanitation in particular about food as much as 50.0% and that do not support by 50%. This is according Meikawati enough that respondents understand and know about higieni and food sanitation. Attitude can also according Meikawati based on the experience gained and the common cultural attitudes can be influenced even by the facilities available.

5. Conclusion

Based on the results of research and discussion, it can be concluded that the description of basic sanitation management knowledge is at the low category whereas attitude clean and healthy life, as much as 61.5% of Kupang not leave a comment. This is supported by observations on the ground that in the study area are still many people use the river or the so-called right time Jerky flow in the middle of the city of Kupang as the final disposal of their feces even the most worrying that the kids happy while bathing under the flow of time The pass also fecal droppings of sinkhole homes directly related to the time.

References

Anonymous. (2014). Daftar Registrasi Kependudukan. Penerbit Badan Pusat Statistik Kota Kupang.

Blum, H. L. (1974). Planning for Health, Development and Application of Social Change Theory. Human Science Press, New York.

Depkes. (2005). Pedoman Teknis Penyehatan Perumahan. Depkes RI, Direktorat Jenderal PPM dan PL.

Emil, S. (1993). Pembangunan Berwawasan Lingkungan. Jakarta: PT Pustaka LP3ES.

Meikawati W., Rahayu, A., & Susilawati. (2010). Hubungan Pengetahuan dan Sikap Petugas Penjamah Makanan dengan Praktek Higiene dan Sanitasi Makanan di Unit Gizi RSJD Dr. Amino Gondohutomo, Semarang. *Jurnal Kesehatan Masyarakat Indonesia*, 6(1).

Mulyadi. (2010). Pengaruh Pengetahuan tentang Lingkungan Hidup, Kearifan Lokal, Locus of Control, dan Motivasi Bertani terhadap Perilaku Bertanggung jawab Petani di Kabupaten Soppeng. Disertasi (tidak diterbitkan), Program Pascasarjana UNJ, Jakarta.

Notoatmodjo, S. (2007). Kesehatan Masyarakat, Ilmu & Seni. Cetakan pertama. Penerbit Rineka Cipta, Jakarta

Notoatmodjo, S. (2010). *Pengantar Pendidikan Kesehatan dan Ilmu Perilaku Kesehatan*. PT Andi Offset, Yogyakarta.

Ramdaniati. (2008). Pengetahuan dan Sikap Pengaruh dan Hubungannya Dengan PHBS Ibu Rumah Tangga di RW 04 Kelurahan Manggarai Jakarta Selatan. Hasil Penelitian di FKM, Universitas Indonesia, Jakarta.

Sarudji, D. (2006). Kesehatan Lingkungan. Cetakan 1, Penerbit Media Ilmu, Sidoarjo.

Sarwono, S. (2007). Sosiologi Kesehatan (Beberapa Konsep dan Aplikasinya). Cetakan keempat, Penerbit Gadjah Mada University Press, Yogyakarta.

Wahyuni E. I. (2011). Gambaran Karakteristik Keluarga Tentang PHBS pada Tatanan Rumah Tangga Di Desa Karangasem Wilayah Kerja Puskesman Tanon II Sragen. *Jurnal Gaster*, 8(2), 741-749.

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